VISTA DE ORO
MOBILE HOME PARK

RENTAL APPLICATION AND MINIMUM REQUIREMENTS

Thank you for your interest in applying at Vista De Oro MHP. Please submit the following items to the manager for application processing.

- **Completed and Signed Application Form**
- **Pay the Application Fee by Cash, Check or Money Order**
- **Provide Proof of Income: 3 most recent paystubs, bank statements etc.**
- **Photo Copy of Drivers License or State ID Card**
- **Signed Consent form authorizing the Credit/Background check.**
- **$ 25.00 Processing Fee for each application.**

Each person of 18 years or older who will be living in the residence and for any co-signer if applicable.

Please allow 2 – 3 Business days to process the applications.

Please Note Our Minimum Basic Requirements Prior to Submitting an Application.

- **Verifiable Income**
- **FICO Score of 700 or higher**
- **Income must be at least Three (3) times the monthly space rent.**
- **No Previous Evictions**
- **Current Space rent: $942 per month plus utilities**
- **$942 Required deposit at time of signing Lease Agreement.**
- **Pet size and breed restrictions apply, 1 dog. 35lb limit, 22" at shoulder**
- **No Street Parking. All vehicles must fit in carport. Storage available $**

PLEASE PRINT NEATLY

APPLICATION TO RENT / SCREENING FEE

I APPLICATION TO RENT

THIS SECTION TO BE COMPLETED BY APPLICANT. A SEPARATE APPLICATION TO RENT IS REQUIRED FOR EACH OCCUPANT 18 YEARS OF AGE OR OVER, OR AN EMANCIPATED MINOR.

PLEASE PRINT CLEARLY

1. Applicant is completing Application as a (check one) [ ] tenant [ ] tenant with co-tenants or [ ] guarantor/co-signer.

   Total number of Applicants: _____.

2. PREMISES INFORMATION
   Application to rent property at _____ ("Premises")
   Rent: $ 942.00 per Month + Utilities Proposed Move In Date _____

3. PERSONAL INFORMATION
   A. FULL NAME OF APPLICANT:
   PRINTED:_____

   B. Date of Birth _____ (for purpose of obtaining credit reports. Age discrimination is prohibited by law)

   Do You plan to Pay: CASH [ ] or FINANCE [ ] Finance Company _____

   Who is your agent or Realtor _____ Phone _____

   C. 1. Drivers License # _____ State _____ Expire Date: _____

   2. Social Security Number (for Credit and Background Check) _____

   D. Phone Number: Home: _____ Work: _____
   Other: _____

   E. Email: _____

   F. Name(s) of all other proposed occupant(s) and relationship to applicant

   _____

   _____

G. Pet(s) Other than service or companion animals) Number and type. 1 dog, size and breed restrictions apply.

_____

H. Auto: Make_____ Model _____ Year _____ License # _____ State _____

Color _____
Other Vehicle(s)

_____

I. In case of emergency person to notify

_____

Relationship _____ Address
_____Phone_____

J. Does applicant or any proposed occupant plan to use liquid-filled furniture? [ ] No [ ] Yes

Type_____

K. Has applicant been a party to an unlawful detainer action or filed bankruptcy within the last seven

years [ ] No [ ] Yes

explain_____

L. Has applicant, or any proposed occupant, ever been asked to move out of a residence?
[ ] No [ ] Yes
If yes explain

_____

M. Has Applicant or any proposed occupant ever been convicted of or pleaded no contest to a felony within the last seven years:
[ ] No [ ] Yes. If yes,
explain_____

(After completing a credit review, Landlord may consider the nature of the felony and the length of time since it occurred, so long as the felony is directly related to the applicant's ability to meet its obligations under the lease terms, and any other Relevant mitigating information pursuant to 2 CCR 12266)

4. **RESIDENCE HISTORY**

Current address_____

City/State/Zip_____

From _____ **To** _____

Landlord/Manager Name _____

Previous address_____

From_____ **To** _____

Landlord/Manager Name _____

Reason for leaving: _____

5. **EMPLOYMENT**

Current Employer _____ **Start Date** _____

Address _____ **Monthly Pay** _____

Job Title _____ **DATE EMPLOYMENT BEGAN:** _____

Length of time on current job: _____ **Applicants Initials** _____

The above information is correct: Signature: _____

CONSENT TO PERFORM CRIMINAL HISTORY BACKGROUND CHECK IN COMPLIANCE WITH THE FCRA
(Fair Credit Reporting Act)

This authorization and consent for release of personal information acknowledges that: **VISTA DE ORO MHP, LLC** (hereafter referred to as "Company") and/or its agent, C4 Operations LLC may now, or at any time renting from conduct investigations whether the records are of a public, private or confidential nature. These investigations might include, but are not limited to, searches of educational institutions attended; state driving records; financial or credit institutions, including records of loans; records of commercial or retail credit agencies; other financial statements; records of previous employment, including work rental history, efficiency ratings, complaints and grievances filed by or against me; records and recollections of attorney-at-law or of other counsel, whether representing me or any other person (in either civil or criminal case in which I have been involved); records from the US Veterans' Administration; criminal history information of file in local, state or federal agencies; and motor vehicle records. I understand that these searches will be used to determine renting eligibility under the company's renting policies. Therefore, I authorize and consent for full release of records (either orally or in writing) to the authorized representatives of the company. In addition, I release and discharge the company and its agent and associates to the full extent permitted by law from any claims, damages, losses, liabilities, costs expenses or any other charge or complaint filed with the agency arising from retrieving and reporting this information. I understand that according to the Federal Fair Credit Reporting Act, I am entitled to know whether occupancy was denied based upon the information obtained and to receive, upon written request, a disclosure of the background report. I also understand that I may request a copy of the report from **C4 Operations LLC, 1201 Edgewood Rd SW, Cedar Rapids, IA 52404** at telephone number 319-491-6300. After reading this document, I fully understand its contents and authorize the background verification.

Signed this _____ **Day of** _____ **20** _____

Applicant (Print) Full Name _____

Applicant Signature _____

This form cannot be altered in any way. Thank you! C4 Operations LLC